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Attorney Docket Nur	mber	920976.90199	
First Named Inventor		Barbara R. Evans	
COMPLETE IF KNOWN			
Application Number			
Filing Date	Filed	Herewith	
Group Art Unit			
Examiner Name	•		
	First Named Invento COMPL Application Number Filing Date Group Art Unit	COMPLETE IF Application Number Filing Date Group Art Unit	

	required							
As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and names are listed below) of the sub	sole inventor (if only on ject matter which is clair	e name is listed below) o med and for which a pate	or an original, first ent is sought on th	and joint inventor (if plural ne invention entitled:				
Metallization of Ba	cterial Cellulose for	Electrical and Elect	ronic Device N	Manufacture				
	•							
	(Title of th	he Invention)						
the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY)	*	as United St	ates Application N	Number or PCT International .				
	· · · · · · · · · · · · · · · · · · ·		r					
Application Number	and was a	mended on (MM/DD/YY	YY)	(if applicable).				
I hereby state that I have reviewed	and understood the con-	ntanto of the obove identi	ified specification	including the claims as				
amended by any amendment spec	and understand the con ifically referred to above	e.	med specification	, moldding the daints, as				
I acknowledge the duty to disclose in-part applications, material inform PCT international filing date of the	nation which became av	ailable between the filing	defined in 37 CFf date of the prior	R 1.56, including for continuation- application and the national or				
I hereby claim foreign priority bene or plant breeder's rights certificate	efits under 35 U.S.C. 11	19(a)-(d) or (f), or 365(b)	of any foreign ap	oplication(s) for patent, inventor's				
than the United States of Americant patent, inventor's or plant breeder	a lieted below and hav	woled belitteehi oele av	hy checking the	box any toreign application for				
application on which priority is clair	ned.		Priority	Certified Copy Attached?				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Not Claimed	YES NO				
Additional foreign application	numbers are listed on a	supplemental priority da	ta sheet PTO/SB	/02B attached hereto:				

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Country	· .	Telephon	e				Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has b	een file	d for this unsigned inventor
Given Name Barbara R (first and middle [if any])				Family I	lame Eva	ans	
Inventor's Signature Boshan	_ 7	R E	-an		_		Date 12/10/2001
Residence: City Oak Ridge			TN State		Country	ıs	Citizenship US
Mailing Address 103 Outer Drive							
Mailing Address							
City Oak Ridge	TN State			ZIP 37	7830		Country
NAME OF SECOND INVENTOR	:			A petiti	on has b	een file	d for this unsigned inventor
Given Name Hugh M. (first and middle [if any])				Family N	lame O'	Neill	
Inventor's Signature Date 12-10-01							
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Mailing Address 8631 Gleason Drive							
Mailing Address							
City Knoxville	State TN			ZIP 379	923		US Country
Additional inventors are being named		suppleme	ntal Additio		tor(s) shee	et(s) PTO	

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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Sumame				
Valerie Malyvanh		Jar	nsen				
Inventor's Valeure Malyvanh Janean Date 10					Date 12/11/01		
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Given Name (first and middle [if any])		Family Na	ame or S	Sumame		
Jenethan	_	Weodward					
Inventor's Signature					Date		
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Mailing Address							
City Knowillo	State TN		ZIP 2 7029	Cou	ntry US		
Name of Additional Joint Inventor, if an	ıy:		A petition has been file	d for this	unsigned inventor		
Given Name (first and middle [if any])	•	Family Name or Surname					
Inventor's Signature					Date		
Residence: City	State	Country			Citizenship		
Mailing Address							
Mailing Address			•				
City	State		ZIP	Co	puntry		

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DECLARATION

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if a	ny:	A petit	ion has been file	d for tl	his unsigned inventor
Given Name (first and middle [if any	y])		Family Nam		
Valerie P:	-	Malyvanir			
Inventor's Signature					Date
Residence: City	State TN	Country	40		Citizenship
Mailing Address 498-Adamwood Brive FC)				
Mailing Address					
City Hashville	State T++	ZIP 37	211- C	ountry	, UD
Name of Additional Joint Inventor, if ar	ny:				s unsigned inventor
Given Name (first and middle [if any])		Family Name	or Su	urname
Jonathan		Woodwa	ırd		
Inventor's Grathan Wood	durand				Date /8/10/01
Residence: City Knoxville	State TN	Country	US		Citizenship US
Mailing Address 8706-Hepsmont-Way 7	734 ES	JER Y	VAY 9	M	
Mailing Address Apt. 304 QW					
City Knoxville	State TN	ZIP 37	923 37909	Coun	try US
Name of Additional Joint Inventor, if an		A petition !	nas been filed for	r this ι	unsigned inventor
Given Name (first and middle [if any])			Family Na	me or	Surname
	1				
Inventor's Signature					Date
Residence: City	State	Country			Citizenship
Mailing Address					
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City	State	710	İ	C	

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	Filed Herewith
First Named Inventor	Barbara R. Evans
Title	Metallization of Bacterial Cellulos
Group Art Unit	
Examiner Name	
Attorney Docket Number	920976.90199

I hereby appoint:	
Practitioners at Customer Number 24298	
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all	
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I am the:	
Applicant/Inventor.	
Assignee of record of the entire interest. See 37 CFR 3.71.	
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
SIGNATURE of Applicant or Assignee of Record	
Name Barbara R. Evans	
Signature Barbara R Evans	
Date 12/10/2001	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	:
*Total of _4forms are submitted.	

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Application Number	
Filing Date	Filed Herewith
First Named Inventor	Barbara R. Evans
Title	Metallization of Bacterial Cellulos
Group Art Unit	
Examiner Name	
Attorney Docket Number	920976.90199

(02-01)

I hereby appoint:			
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OR Practitioners	at Customer Number 24290		
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I am the: Applicant/Inv	ventor		
Applicationiv	vernor.		
Assignee of Statement ui	record of the entire interest. See 37 CFR 3.7 nder 37 CFR 3.73(b) is enclosed. (Form PTC	l. <i>ISB</i> 196).	
	SIGNATURE of Applicant or Assigned	of Record	
Name Hug	gh M. O'Neill		
Signature \forall	light on and		
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NOTE: Signatures of all the	inventors or assignees of record of the entire interest or ature is required, see below*.	their representative(s) are re-	quired. Submit multiple
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Application Number	
Filing Date	Filed Herewith
First Named Inventor	Barbara R. Evans
Title	Metallization of Bacterial Cellulos
Group Art Unit	
Examiner Name	
Attorney Docket Number	920976.90199

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I am the:								
✓ Applican	nt/Invento	or.						
		ord of the entire in 37 CFR 3.73(b)						
		SIGNATURE	of Applicant or	Assigne	e of Rec	ord		
Name	Valerie	Malyvanh Janser	า					
Signature	Vale	ie Male	wash	Jan	son			
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NOTE: Signatures of al				interest or	their repr	esentative(s)	are required. Sub	mit multiple
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First Named Inventor	Barbara R. Evans	
Title	Metallization of Bacterial Cellulos	
Group Art Unit		
Examiner Name		
Attorney Docket Number	920976.90199	

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Assignee of re	cord of the entire interest. See 37 CFR 3.7	71.	
Statement und	er 37 CFR 3.73(b) is enclosed. (Form PT	O/SB/96).	
	SIGNATURE of Applicant or Assigne	ee of Record	
Name Jonat	han Woodward		
Signature	onather Woodward		
	12/10/01		
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